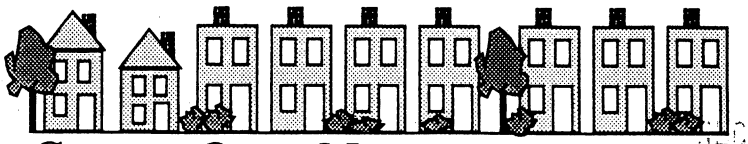

Save Our Neighborhood

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CAMBRIDGE MA.

7.

March 14, 1994

Ms. Margaret Drury
Cambridge City Clerk
City Hall
795 Massachusetts Avenue
Cambridge, MA 02139

Dear Ms. Drury:

I hereby request that the enclosed letter and attachments be incorporated into the permanent records of the Cambridge City Council.

Thank you for your assistance and cooperation.

Sincerely yours,

Joseph Manley
Chairman **SON**

Enclosures (5)

JPM/hd

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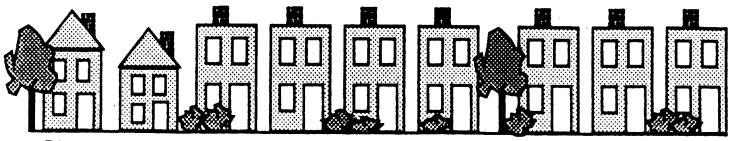

Save Our Neighborhood

March 14, 1994

The Cambridge City Council
City Hall
795 Massachusetts Avenue
Cambridge, Massachusetts 02139

To the Honorable, the City Council:

It is incumbent upon me as a representative of the Cambridge and Somerville community to advise you, as Cambridge's chief elected officials, of a major public inaccuracy regarding the Cambridge Hospital controversy.

The press, Hospital officials, and certain MCNA members have repeatedly stated that **Save Our Neighborhood**'s position or purpose is to oppose the expansion project. **It is a matter of record that SON's policy from its founding has been to pursue a compromise settlement with Cambridge Hospital.**

This is documented not only by our "Community Resolve on Cambridge Hospital Expansion" signed by hundreds of residents of Somerville and Cambridge, which was submitted to the Council, but is also recorded in one of our founding resolutions adopted on April 20, 1993. This resolution was immediately reflected in our April 26, 1993 letter to Cambridge Hospital Administrator John O'Brien, a copy of which was provided to the Council. This resolution was also enshrined in our Bylaws adopted on November 16, 1994. Copies of such resolution and the April 26, 1993 are attached for your reference.

Though many members disagree with the need and/or the advisability of the project, at least as proposed, we have approached the Hospital as a neighbor and property owner with whom we wished an accommodation.

The Hospital has to date utterly failed to make such a compromise possible.

The principal problem is the size of the project. No meaningful and valid agreement with the community will ever occur without a resolution of this issue.

Whereas the maximum size the neighborhood could tolerate without unacceptable damage to our residential environment is 45,000-50,000 square feet, the Hospital presently insists on 79,000 square feet. This is despite the fact that the Hospital Administrator stated in our earliest negotiations on May 6, 1993 that the Hospital then planned 64,000 square feet, which is in fact the approximate figure allowable with the Hospital's current lot under zoning regulations. He also stated that the 64,000 was subject to negotiation, "on the table", and we stated that we wanted to see a major reduction.

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The Hospital has in fact moved in the opposite direction from any compromise, particularly with their proposed Camelia Avenue maneuver.

This is despite hard work and considerable good faith effort by **SON**.

Negotiations aimed at a settlement were requested immediately after our founding in our letter of April 26, 1993, and the first negotiating meeting occurred on May 6, 1993 pursuant to a Council Order. Due to the outrageousness of the Hospital's response to our first attempts at negotiations, as documented by our letter of May 21, 1993, we expended great time and effort to secure pro bono representation.

Assisted on a pro bono basis by Sherburne, Powers & Needham of Boston, and in particular Attorney William McCarthy Jr., the **SON** negotiating team recommenced negotiations on August 25, 1994. Attorney McCarthy expended considerable time and his firm's resources on his first assignment, which was to help negotiate a compromise.

After promising for some months of negotiations to do a downsizing of the project, the Hospital on November 15, 1993 announced their intent to build 79,000 square feet instead of the 64,000 initially proposed in May.

Shortly thereafter the Hospital, without discussion or consultation with **SON**, unilaterally terminated the joint SON/MCNA project committee process. Discussion of this process had consumed much of the negotiating time since August 25 of that year.

The separate MCNA and SON committees simply gather community input as to how the unacceptably sized project will be implemented. They do not and cannot address the issues of substance that divide the Hospital and the community. They therefore do not and cannot constitute meaningful negotiations.

Such is the unfortunate status of the project at this point in time.

SON continues to be open to discussion, change, and progress in this regard.

In your capacity as elected officials of Cambridge, you are entitled to this information regarding a city department. It is in turn my obligation to so inform you, not only in my capacity as representative of the **SON** membership, but in consideration for the many citizens and taxpayers who are members of no organization, but who will nonetheless be seriously affected by this major capital project.

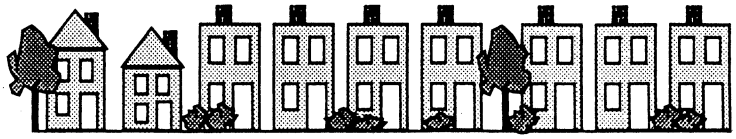
Thank you for your attention.

Sincerely,

Joseph Manley
Chairman **SON**

Enclosures
JPM/hd

cc: Honorable Michael E. Capuano, Mayor of Somerville
Massachusetts Department of Public Health
State Representative Patricia Jehlen
City Clerk



Save Our Neighborhood

RESOLUTION ADOPTED UNANIMOUSLY AT THE FOUNDING MEETING OF **SAVE OUR NEIGHBORHOOD** on April 20, 1993.

Resolution No. 2

We favor a negotiated settlement as to the scale, scope, impact, and duration of any hospital construction project, in which Somerville * abutters and community members, as represented by our association, participate as parties with rights equal to those of the hospital. The Hospital must, to the fullest possible extent, endeavor to meet its legitimate needs by renovating and modernizing the present structure. The Hospital must not be allowed to engage in exponential growth in its patient load without neighborhood association consultation and approval. If such growth is the only option, the Hospital must find another site that does not require such a heavy sacrifice from a neighborhood.

[emphasis added]

* This wording is due to the fact that the founding meeting was attended by Somerville residents. Cambridge members soon joined the organization, and this resolution has become part of the bylaws that apply to all members.

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CAMBRIDGE, MASSACHUSETTS

APRIL 1993

COMMUNITY RESOLVE ON CAMBRIDGE HOSPITAL EXPANSION

Whereas, the scale, impact, and 5-year duration of the proposed Cambridge Hospital expansion project are intrinsically and by their very nature unacceptable to our neighborhood and our community in terms of noise, pollution, health, pests, traffic, nuisance, and major disruptions of occupations, property rentals and sales, and lives in general; and

Whereas, participation in the design phase is therefore a remedy with no relevance to our objections; and

Whereas, given the absence of a long term demonstration that the Hospital can adequately manage the existing facility's routine impact on the neighborhood, of which it has already been fully warned and advised over the years, no promises regarding its future conduct with a much larger facility have any credibility with us as a community; and

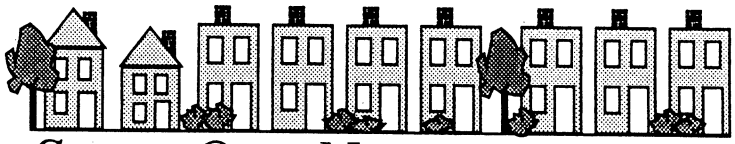
Whereas, the process for the Cambridge Hospital expansion project has to date been flawed and inappropriate in that our de facto exclusion from the environmental review process has resulted in an incomplete, inadequate, and scientifically unquantified assessment of the impact of the project on our neighborhood, our community, and our city;

Therefore, we, the undersigned abutters and citizens of Cambridge, do hereby petition the Cambridge City Council to :

1) disapprove the Cambridge Hospital expansion project as submitted to the Council, and

2) instruct the Cambridge Hospital to proceed with an attitude and conduct based on full respect for our rights and concerns as abutters, a community, and a city.

On that basis, we are confident that the legitimate needs and interests of both our community and the Cambridge Hospital can be served to our mutual advantage and benefit--and that is our hope and objective as we write to you.



Save Our Neighborhood

April 26, 1993

Mr. John O'Brien, Administrator
The Cambridge Hospital
1493 Cambridge Street
Cambridge, Massachusetts 02139

VIA FAX

Dear Mr. O'Brien:

First of all, I would like to introduce our new neighborhood organization to you.

Members of the Somerville community recently organized **Save Our Neighborhood (SON)** and circulated a policy document on the hospital expansion issue that was signed by the overwhelming majority of the Beacon-Line neighborhood and the Somerville abutters of the Hospital, as state law defines abutters. Somerville's only Ten Taxpayer Group for the Cambridge Hospital project is a subset of our membership. **We therefore represent and speak for the neighborhood and its views.**

As you know, the lack of a definable neighborhood entity has complicated discussions with Cambridge officials in the past. We have now taken action that remedies this situation.

Our officers are:

Chairperson: **Joseph Manley** Vice-Chairperson: **Mary Ellen Duckett** Secretary: **Helena Alves**
Treasurer: **Irene Bacci** Director, Executive Committee: **Carl Johnson**

Let me stress that our immediate policy goal is an **amicable resolution** that ensures both that the Hospital's legitimate needs are met and that the neighborhood's human rights and property rights are fully respected. We do not feel that the process to date has respected either our rights or our interests.

Since you have indicated your willingness to move to rectify the past situation, I hereby request your agreement that our organization, **SON**, appoint all Somerville representatives to the Hospital's Community Advisory Committee (CAC), in accordance with an **SON** policy resolution adopted by unanimous consent. All persons deemed by the members and neighbors to be appropriate representatives of their interests shall be eligible to be appointed or re-appointed, as the case may be.

We view your action in this matter to be an early indication of your willingness to move to resolve the situation between your institution and our community.

I also hope to meet with you directly in the near future to begin a search for solutions to the serious issues before us in this neighborhood and community.

In general, I request that when you wish to communicate with our neighborhood on any issue you first go through me as **SON** chairman.

In conclusion, I wish to express this neighborhood's considerable distress at recent disclosures about pill selling in our neighborhood and elsewhere by clients of the methadone clinic located on your premises. It is superfluous to restate in this letter the many representations made on this issue

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over the last 17 years by our co-chair, Mary Ellen Duckett, who is now on vacation, or the repeated complaints of others in the neighborhood. I will be in touch with you on this subject once I coordinate the issue with our Mayor, in view of the substantial public safety issue involved.

In closing, I wish to underscore our hope that you will cooperate with our neighborhood. Our view of the Hospital shall be results-oriented and performance-based, in cordiality and without personal animus. We sincerely wish for you and your institution to succeed in the mission entrusted to you by your community, and our agreements or disagreements with you as to serious issues of public policy, human rights, and private interests will be approached with an attitude of courtesy and respect, which we hope will be reciprocated.

Most sincerely,

Joseph P. Manley
Chairman **SON**

cc: Cambridge City Council
Mayor Michael E. Capuano

JPM/hd

Save Our Neighborhood

May 21, 1993

Mr. John O'Brien, Administrator
The Cambridge Hospital
1493 Cambridge Street
Cambridge, Massachusetts 02139

VIA FAX

Dear Mr. O'Brien:

After extensive consultation with our **SON** members and with counsel, we feel it necessary to reply in writing to your letter of May 13, 1993, and the draft Memorandum of Understanding included with it, particularly when oral exchanges on the subjects at issue have proved so fruitless.

There are too many objectionable provisions in the MOU to be detailed in this letter. Not only were the many objections **SON** expressed regarding the prior draft not addressed in this draft, but provisions were added which directly contradicted the wishes of **SON** and our community, as stated not only in my very express representations to you at our meeting of May 6, 1993, but also my letter of April 26, 1993, which in turn was based on a resolution unanimously adopted by **SON** members at a public meeting to which all members of the community were invited.

We refer specifically to the issue of Somerville representation on the Hospital's Community Advisory Committee (CAC), for which I restate the following background.

To remedy the situation created by the Hospital's past practice of having Somerville representatives to the CAC appointed by the City of Cambridge without designation or approval by our community, my letter of April 26, 1993 made the following request:

> "Since you have indicated your willingness to move to rectify the past situation, I hereby request your agreement that our organization, **SON**, appoint <u>all</u> Somerville representatives to the Hospital's Community Advisory Committee (CAC), in accordance with an **SON** policy resolution adopted by unanimous consent. All persons deemed by the members and neighbors to be appropriate representatives of their interests shall be eligible to be appointed or re-appointed, as the case may be."

This procedure would have ensured, in a simple and non-confrontational manner, that all Somerville members of the CAC were bona fide representatives of the community and its interests.

<u>Your suggestion in your May 13 letter that future discussions on Somerville representation be based on an MOU that deliberately and expressly grandfathers in the existing and totally unacceptable situation is a disingenuous but direct affront to our community and its stated wishes.</u> Furthermore, it is wholly inappropriate and illegitimate to make provisions regarding Somerville representation in an agreement to which no one in Somerville is currently a party. Equally inappropriate and quite outrageous is the provision in the final version of the MOU signed by Mr. Healy, as well as your statement in your May 13 letter, which gives a neighborhood organization in another jurisdiction a very crucial and substantial say in the composition of the Somerville representation--for all that we may respect the Mid-Cambridge Neighborhood Association, MCNA should have no more say about Somerville representatives than the Somerville community should have about Cambridge representatives. Finally, a specific change provided in the final MOU version in effect gives you as Administrator veto power over changes in current CAC membership, thereby sealing the unfairness of the process and demonstrating <u>an intent to dictate, not negotiate.</u>

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Our position that no one can act for or represent a neighborhood or a community if not designated by same is a common sense proposition that is no more negotiable than the color of the sky.

Furthermore, we clarify for the record that any individual from the Somerville community who elects to sit on any in-house Hospital committee does not by virtue of that fact, or by virtue of appointment by any party outside the Somerville community, have any status, standing, or capacity as a representative of our community or our neighborhood. It is only common sense, as buttressed by many other considerations, that such status, standing, or capacity may only be properly conferred by the community and the neighborhood, for which **SON** is the only organized, established and broad-based representative.

Absent such express action by the community and the neighborhood, any such individual may not act or speak for our community, and certainly is not, and never has been authorized to participate in or influence any decisions or actions that affect the rights and interests of other individuals.

Also not negotiable are minimum ethical standards which the Hospital is at all times expected if not required to observe as an institution. Conflict of interest, or even the appearance of conflict of interest, are clearly unacceptable under the ethical standards of our society in general, particularly when lives and property may potentially be affected. Moreover, the Hospital's respect for the ethical standards of the neighborhood is an indispensable element of community relations. In this regard, we are particularly appalled by your statement at the May 6, 1993 meeting that such ethical considerations and the community's view of them are of no consequence or importance to you.

Simply adding additional Somervillle members to the CAC, if that could be negotiated, would not solve the problem--conflict of interest diluted is conflict of interest nonetheless.

If the Hospital wished to correct a situation, already part of the public record, which has for quite some time tainted and compromised the entire process of consultation with the Somerville community, it could have done so long since, unilaterally and by a stroke of the pen--since that was how it was created in the first place.

To instead seek to grandfather in and make permanent this past representation situation through an agreement to be signed by no authorized representative of the Somerville community is anything but good faith. It is also highly prejudicial to any negotiations regarding this point or any other.

That such matters are even subject to discussion is a further demonstration of the deplorable state of the Hospital's community relations in Somerville.

Furthermore, such wholesale contempt for the views and concerns of our neighborhood, as well as for our ethical standards and those of society in general is not, in terms of your institution's future relations with our community and the negotiations we are about to undertake with you, encouraging or promising--and stronger words certainly come to mind.

Nevertheless, as reasonable parties should in such circumstances, we shall continue to seek progress on the issues between us, and hope that you will eventually reconsider conduct which is inimical to the best interests and future of the Cambridge Hospital, as well as to our community.

The Community Advisory Committee can ipso facto be no more than its title suggests--advisory in nature, a possibly useful channel of communication, provided the advice and communication is effected by bona fide community representatives.

The framework detailed in the Memorandum Of Understanding, including the CAC, is so fundamentally flawed that it can serve no meaningful function or role in mediating the rights and interests of the interested parties--as this MOU implicitly purports to do. The entire structure of the MOU is but another version of the Hospital's longstanding practice, according to which the community proposes, and the Hospital disposes--an arrangement that accords abutters and non-abutters in the community no rights, does not reflect our existing rights under the legal system, and therefore compromises such rights.

Any solution must be therefore comprehensive, and is inextricably linked to a resolution of the issues pertaining to the Hospital's proposed expansion. Such matters are therefore properly part of the negotiation before us, and no agreement would be possible or relevant prior to a comprehensive resolution of all the issues before us. As interested parties under State law, Massachusetts Department of Public Health regulations, and other provisions, there is already a sufficient framework and great mutual interest toward attempting such a solution.

Finally, as a community organization in a neighborhood whose identity, relationships, and reality are not defined by a town line, we also state for the record our view that the current Memorandum Of Understanding is inimical to the rights and interests of Cambridge abutters and residents. At the same time, we note that it shall be up to the citizens of Cambridge to redress this situation.

We reiterate that, as reasonable parties, we wish to seek progress on all issues between us, and remain committed to the negotiations which we have discussed with you. We nonetheless feel that the matters discussed in this letter, which involve issues and problems which have been outstanding in our community for quite some time, must be made clear for the record before engaging in any substantive negotiations. Once certain things are clearly understood by all parties concerned, our chances for productive and successful negotiations are much greater. Our members are presently engaged in intensive preparations for these negotiations, and we will be in touch with you in this regard in the near future.

Sincerely,

Joseph Manley
Chairman **SON**

JPM/hd

cc: Cambridge City Council
Honorable Michael E. Capuano, Mayor of Somerville
John Pitkin, President, Mid-Cambridge Neighborhood Association

Consnet CoMmunication #7

S-105

CoMm. received from Save OUr Neighborhood re: major public inaccuracy re: the Cambridge Hospital controversy.

In City Council March 21, 1994

Placed on file.